

# 48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

|                                                                                                                                                                         |                   |                                       |                                                                                                                              |                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------------------------------|------------------------------------------------------------------------------------------------------------------------------|-------------------|
| 1. NAME OF COMMITTEE IN FULL<br>Cole for Congress                                                                                                                       |                   |                                       |                                                                                                                              |                   |
| ADDRESS (number and street) P.O. Box 722256                                                                                                                             |                   |                                       |                                                                                                                              |                   |
| CITY<br>Norman                                                                                                                                                          |                   | STATE<br>OK                           |                                                                                                                              | ZIP CODE<br>73070 |
| 2. NAME OF CANDIDATE<br>Cole, Tom, , ,                                                                                                                                  |                   |                                       | 3. OFFICE SOUGHT (State and District)<br>House OK 04                                                                         |                   |
| 4. FEC IDENTIFICATION NUMBER<br>C00379735                                                                                                                               |                   |                                       |                                                                                                                              |                   |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |                   |                                       |                                                                                                                              |                   |
| A. FULL NAME<br>American Forest & Paper Assn PAC                                                                                                                        |                   |                                       |                                                                                                                              |                   |
| MAILING ADDRESS<br>601 Thirteenth St NW<br>Suite 1000N<br>CITY<br>Washington                                                                                            |                   |                                       | Name of Employer<br><br>Transaction ID : F65-CN58906<br>Occupation                                                           |                   |
| STATE<br>DC                                                                                                                                                             | ZIP CODE<br>20005 | Date (month, day, year)<br>05/29/2026 |                                                                                                                              | Amount<br>2500.00 |
| B. FULL NAME<br>Committee For Advancement Of Cotton                                                                                                                     |                   |                                       |                                                                                                                              |                   |
| MAILING ADDRESS<br>PO Box 2995<br>CITY<br>Cordova                                                                                                                       |                   |                                       | Name of Employer<br><br>Transaction ID : F65-CN58910<br>Occupation                                                           |                   |
| STATE<br>TN                                                                                                                                                             | ZIP CODE<br>38088 | Date (month, day, year)<br>05/29/2026 |                                                                                                                              | Amount<br>2500.00 |
| C. FULL NAME<br>Finseca PAC                                                                                                                                             |                   |                                       |                                                                                                                              |                   |
| MAILING ADDRESS<br>1400 K St NW<br>Suite 625<br>CITY<br>Washington                                                                                                      |                   |                                       | Name of Employer<br><br>Transaction ID : F65-CN58970<br>Occupation                                                           |                   |
| STATE<br>DC                                                                                                                                                             | ZIP CODE<br>20005 | Date (month, day, year)<br>05/29/2026 |                                                                                                                              | Amount<br>1000.00 |
| D. FULL NAME<br>National Automobile Dealers Assoc PAC                                                                                                                   |                   |                                       |                                                                                                                              |                   |
| MAILING ADDRESS<br>412 First Street SE<br>CITY<br>Washington                                                                                                            |                   |                                       | Name of Employer<br><br>Transaction ID : F65-CN58971<br>Occupation                                                           |                   |
| STATE<br>DC                                                                                                                                                             | ZIP CODE<br>20003 | Date (month, day, year)<br>05/29/2026 |                                                                                                                              | Amount<br>5000.00 |
| E. FULL NAME<br>Jones, Kimberly, Ann, Ms.,                                                                                                                              |                   |                                       |                                                                                                                              |                   |
| MAILING ADDRESS<br>4835 Cordell Ave<br>Apt 220<br>CITY<br>Bethesda                                                                                                      |                   |                                       | Name of Employer<br>Council for Opportunity in Education<br><br>Transaction ID : F65-CN58972<br>Occupation<br>Vice President |                   |
| STATE<br>MD                                                                                                                                                             | ZIP CODE<br>20814 | Date (month, day, year)<br>05/29/2026 |                                                                                                                              | Amount<br>1000.00 |
| SIGNATURE (optional)<br>Nagel, Rick, , Mr.,                                                                                                                             |                   |                                       | DATE<br>05/30/2026                                                                                                           |                   |
| For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov                                                                   |                   |                                       |                                                                                                                              |                   |

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Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

**FEC FORM 6**  
(Revised 03/2016)

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| 1. NAME OF COMMITTEE IN FULL<br>Cole for Congress                                                                                                                       |  |                                                                                  |  |
| ADDRESS (number and street) P.O. Box 722256                                                                                                                             |  |                                                                                  |  |
| CITY, STATE, and ZIP CODE<br>Norman OK 73070                                                                                                                            |  |                                                                                  |  |
| 2. NAME OF CANDIDATE<br>Cole, Tom, , ,                                                                                                                                  |  | 3. OFFICE SOUGHT (State and District)<br>House OK 04                             |  |
|                                                                                                                                                                         |  | 4. FEC IDENTIFICATION NUMBER<br>C00379735                                        |  |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |  |                                                                                  |  |
| continuation page                                                                                                                                                       |  |                                                                                  |  |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Vinyard, Carson, , Mr.,<br>20566 E CR 160<br>Altus OK 73521                                                               |  | Name of Employer<br>Self<br>Transaction ID : F65-CN58909<br>Occupation<br>Farmer |  |
|                                                                                                                                                                         |  | Date (month, day, year)<br>05/29/2026                                            |  |
|                                                                                                                                                                         |  | Amount<br>3500.00                                                                |  |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  | Name of Employer                                                                 |  |
|                                                                                                                                                                         |  | Date (month, day, year)                                                          |  |
|                                                                                                                                                                         |  | Amount                                                                           |  |
|                                                                                                                                                                         |  | Occupation                                                                       |  |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  | Name of Employer                                                                 |  |
|                                                                                                                                                                         |  | Date (month, day, year)                                                          |  |
|                                                                                                                                                                         |  | Amount                                                                           |  |
|                                                                                                                                                                         |  | Occupation                                                                       |  |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  | Name of Employer                                                                 |  |
|                                                                                                                                                                         |  | Date (month, day, year)                                                          |  |
|                                                                                                                                                                         |  | Amount                                                                           |  |
|                                                                                                                                                                         |  | Occupation                                                                       |  |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  | Name of Employer                                                                 |  |
|                                                                                                                                                                         |  | Date (month, day, year)                                                          |  |
|                                                                                                                                                                         |  | Amount                                                                           |  |
|                                                                                                                                                                         |  | Occupation                                                                       |  |